



CITY OF FORT LAUDERDALE

700 N.W. 19TH AVENUE, FORT LAUDERDALE, FL 33311

Venice of America

AFFIDAVIT REGARDING OCCUPATIONAL LICENSE
UTILIZING

MAIL CENTER, ANSWERING SERVICE, OR HOME ADDRESS

AS BUSINESS

STATE OF FLORIDA
COUNTY OF BROWARD
CITY OF FORT LAUDERDALE

LICENSE NUMBER _____

BEFORE ME, the undersigned authority, personally appeared _____
(Applicant name, please print)

And being duly sworn and deposed, says as follows:

1. The name and nature of my business is : _____

2. My residence address is (street/city/state/zip): _____

Phone Number: (_____) _____

3. I am the applicant for which application is being made to utilize a (circle one) **MAIL CENTER,**
ANSWERING SERVICE, OR **HOME ADDRESS** as the business address for a business.

4. I SHALL NOT use my residence for the creation, storing, distribution, repair, or sale of any merchandise or goods, or directly or indirectly engage in any business, trade, occupation, or profession at my residence.

5. I SHALL NOT permit any person or customer to come to my residence in order to obtain any merchandise or goods, or for the purpose of business related activities, and in the event my business involves furnishing of personal services, to procure any services from me.

6. I SHALL NOT use my residential address in any advertisement, solicitation, or announcement with respect to the business for which I am applying for any occupational license.

7. I SHALL NOT increase/expand/change the business operation as described on this date and for which this license is issued, that would require any additional employee other than myself.

8. I SHALL NOT post or display a sign of any type at my residence address to indicate that my residence is being used as the location for the business for which I am applying for an occupational license, and **No** vehicle with any signs painted on it which might serve to indicate my business shall be parked on the premises, except as permitted by the Code of Ordinance of the City of Fort Lauderdale, and **No** business related vehicles or materials of any kind shall be located there.

9. I UNDERSTAND all of the foregoing statements and I further understand that I may be subject to citation, hearing and fines if I am found to be in violation of any of these conditions.

(Applicant's Signature)

SWORN TO AND SUBSCRIBED BEFORE ME this _____ day of _____, 20_____

Notary Public
State of Florida at Large

My Commission Expires: